

Naval Hospital Oak Harbor TRICARE Prime Optimization Q & A from Town Hall Meetings

1. I have been hearing a lot about Medical Home Ports and Patient Centered Medical Homes. Can you tell me more about them?

Navy Medicine primary care services have transitioned from an individual patient/provider model to a standardized primary care team model, which will provide better access, continuity, wellness, and disease management for patients. By standardizing primary care services and enhancing access and continuity, we improve the partnership between the patient, his/her primary care provider and their primary care team, and where appropriate, the patient's family. That partnership focuses on sustaining and enhancing wellness in our patients as well as efficient delivery of comprehensive health care services, based on the needs of our patients. This effort aligns with civilian models of enhanced primary care known as Patient-Centered Medical Home (PCMH). In Navy Medicine, PCMH is known as "Medical Home Port."

Medical Home Ports (MHP) are comprised of a TEAM of providers. By reorganizing our primary care clinics into smaller group practices, or "Medical Home Port Teams," your healthcare team works together to assure your care is provided in a coordinated, comprehensive manner. This represents the best in Team Based Healthcare: You will have an entire team responsible for your healthcare. In addition to your Primary Care Manager (PCM), a Registered Nurse (RN), and a Hospital Corpsman and/or Medical Assistant will be part of your healthcare team. Additional physicians/providers are also part of the team to fill in during absences. This team will partner with you to fulfill administrative requests and provide additional medical services.

2. What hours are your Medical Home Port Primary Care Clinics open?

Our Family and Pediatric Medical Home Ports are open from 7:30 A.M. to 6:00 P.M. Monday - Friday. On Saturday and Sunday, the Family Medical Home is open from 9:00 A.M. - 12:00 Noon and our Pediatrics Clinic is open from 9:20 A.M. - 11:20 A.M. In addition, our Nurse Advice Line is available 24/7, and you can e-mail a question to your provider at any time using our secure e-mail system, Relay Health.

3. With the Medical Home Port open extended hours, are your ancillary services (Pharmacy, Lab, Radiology) open extended hours as well?

Yes. Radiology and Lab services are available any time the Medical Home Port is open. Pharmacy services are currently available until 1830 (6:30 p.m.) on weeknights. We are in the process of hiring additional pharmacists, and our Pharmacy will be open weekend

mornings as soon as we do. We will post information on the Internet, Facebook, and in the hospital when the Pharmacy is open on weekends.

4. When will I know who my new PCM will be?

We will mail you a letter in mid-March introducing your new provider and Medical Home Team. Once you are enrolled to NHOH, you will also receive a letter from United Health Care with that information. In addition, you may call our Enrollment Manager, Ms. Susan Kreps at (360) 257-9716 or you may come in and ask.

5. May I choose a primary care provider at NHOH, or will I be assigned one?

This is your choice. You are welcome to choose a provider, or we can assign you to one in our Medical Home Port. To choose your provider, please contact our Enrollment Manager, Ms. Susan Kreps at (360) 257-9716 or come into the hospital and ask to meet with her.

6. Can I access information about each of your providers online to help me choose?

Due to privacy laws, we cannot post information about our providers online. However you are welcome to call our Enrollment Manager, Ms. Susan Kreps at (360) 257-9716, and we also have a provider directory with this information you can come in and review in our referral office, located in the main hospital between 8:00 a.m. and 4:00 p.m. weekdays. We also offer tours of our facility, and you will be able to meet and talk with some of our primary care providers during your tour. To schedule a tour, please call (360) 257-9500.

7. If I do not like the primary care provider I am initially assigned to, can I change?

Yes, you may change to a different provider within the Medical Home Port at any time.

8. How many primary care providers do you have on staff and how many are civilian and military?

We have 12 providers in our Family Medical Home Teams, of these, 9 are military and 3 are civilian. In our Pediatric Medical Home, we have four providers, and 3 are active duty. Please see FAQ #1 above for more information on MHP teams.

9. How long do providers stay in Medical Home Port?

We have both military and civilian providers. Military providers are here for an average of 2 - 5 years. We have civilian providers who have been here for years. It is important to note that even if your

provider transfers, however, you will still be assigned to the same Medical Home Port Team, so will still be cared for by a team that knows you, which will help with the transition to a new provider.

10. Are you planning to increase the number of primary care providers since you are taking on additional patients? How will you maintain access with the additional patients?

We will not be adding providers at this time. Naval Hospital Oak Harbor currently has one of the best Medical Home Ports in the Navy with 95% patient satisfaction according to the hospital's Interactive Customer Survey (ICE). In addition the Bureau of Medicine and Surgery's "Monitor" patient satisfaction program has documented NHOH as having excellent patient satisfaction consistently for several years. The change to TRICARE Prime will increase the number of patients enrolled to our Medical Home Port by about 5%, and we already have more than enough open appointments to provide great access to these additional patients.

11. How many patients does each provider see?

Each primary care provider is responsible for 1100 patients. Of note, this is significantly fewer patients per provider than many civilian systems, which average between 1500 and 2500 patients per primary care provider. This lower number of patients per provider helps us maintain great access and quality of care.

12. Are our providers certified?

All of our primary care providers are licensed and privileged.

13. Is our Hospital accredited?

Yes. Our entire hospital is accredited by the Joint Commission, which is the primary accreditation organization for hospitals. In addition, our Family and Pediatric Medical Home Ports are accredited by the National Committee on Quality Assurance, the leading organization for Medical Home accreditation, and our laboratory is accredited by the American College of Pathologists, which is the primary accreditation for labs.

14. Do your pediatricians have admitting privileges?

No. Our surgeons and gynecologists have admitting privileges at local hospitals, but our primary care doctors do not. This allows our primary care providers to focus on outpatient care within the Medical Home Port. We have a number of excellent civilian hospitals in the TRICARE Network where patients can be admitted when needed, and we work closely with the doctors and care teams at those hospitals to make sure our patients receive the best possible care.

15. How long is a normal primary care appointment?

By maximizing the care provided through the Medical Home Port Primary Care Clinics, NHOH is ensuring patients receive outstanding, timely care with providers they can trust. A typical follow up appointment lasts approximately 20 minutes; new patients may have a longer initial appointment. To schedule appointments, please contact your Medical Home Team directly at the following numbers: Team Cascade 360-257-5106; Team Olympic 360-257-9561; and the Pediatric Team 360-257-9782.

16. I have heard that it takes two weeks to schedule a primary care appointment at NHOH. Is this correct?

No. We have same day or next day appointments available almost every day.

17. In the past, I was "bumped" from primary care appointments because active duty took priority. Will this happen again?

Although most of our active duty patients are seen in the Aviation Medical Home Port, which is an active duty only primary care clinic, some are seen in the Family Medical Home Port. However, for our Family Medical Home Port, all patients have equal priority for appointments, and once an appointment has been made, you will not be bumped for an active duty member.

18. With many school age children, I am concerned that the 4:30 p.m. and later appointments will fill very fast. Will it be possible to get an appointment during these hours?

In most cases, yes. We are watching utilization of these and the weekend appointments very carefully, and will add extra appointments if needed. To schedule appointments, please call your Medical Home Team directly at the following numbers: Team Cascade 360-257-5106; Team Olympic 360-257-9561; and the Pediatric Team 360-257-9782.

19. How many surgeons do you have?

We have one general surgeon, two orthopedic surgeons, and four OB-GYNs who perform surgeries. NHOH performs an average of 700 surgeries per year with an outstanding record for safety. With the move of our Surgical services to Whidbey General and Island Hospital, our surgeons will be able to perform a wider range of procedures than were possible at NHOH.

20. What can the Nurse Advice Line do?

The Nurse Advice Line, 360-257-9500, is staffed by Registered Nurses who are specially trained to provide advice about medical issues over the telephone. This is currently a local service, but is scheduled to become nationwide in the spring of 2014. The nurses on the advice line use established, evidence-based protocols to determine whether to provide you advice on caring for your symptoms at home, make a next day appointment with your Medical Home Port provider (they can make appointments), or have you go to an Emergency Room immediately.

21. With the growth of the Base, are Whidbey General and Island Hospitals able to take the surgical patients the Navy doctors will now be seeing there?

Yes. NHOH has coordinated closely with both facilities to ensure our civilian partner hospitals will be able to help care for our patients. External Resource Sharing Agreements have been approved by TRICARE, United, and Naval Hospital Oak Harbor with both Whidbey General and Island Hospitals. As a result, surgeries will transition to our civilian partner hospitals but will still be performed by Navy surgeons under the sharing agreement with those hospitals.

22. I am a Diabetic. Will I have to repeat all of my tests?

Your NHOH Primary Care Provider will review your medical record and assess your current lab results. The Primary Care Provider will discuss your individual situation with you, and whether they recommend any tests.

23. It seems like you should expand Medical Home Port instead of Labor and Delivery to best meet the needs of the patients.

We are happy to report that we are increasing both, to make sure we can meet the needs of all of our patients now and in the future.

24. Are there still huge lines at the pharmacy like in the past and do Active Duty in uniform still have preference?

Pharmacy wait times have decreased significantly over the past year. In addition, NHOH is currently installing new pharmacy equipment and hiring additional pharmacists that should speed the pharmacy process up tremendously. Yes, active duty in uniform still have preference.

25. Can I still get my medications out in town or do I have to come to the NHOH pharmacy?

You can still get your medications in town, but you will have to pay the co-pay.

26. I currently use Express Scripts (Mail Order Pharmacy) for my prescriptions. Will I have to change?

No. Patients enrolled to Naval Hospital Oak Harbor are welcome to continue using Express Scripts.

27. With the Urgent Care Clinic (UCC) closed, what do we do for emergency care?

Please call 911 for truly emergent care. There are two ERs (Island and Whidbey General Hospitals) that are relatively close to NHOH and which care for emergent patients. The NHOH UCC was already closed at night and a majority of the care provided there was most appropriately provided in the Medical Home Port practice setting by a team who knows you. We have expanded the hours of our Medical Home clinics to include weekends and evenings. In addition, our 24/7 Nurse Advice Line (360) 257-9500 is also available.

28. How will we accommodate conditions requiring specialty care? Dialysis, Cancer, and Dermatology are some examples.

Specialty Care is not impacted. This initiative only affects Primary care. If you already have a valid referral, it will not change. In addition, our Medical Home Port can provide referrals to specialty care, and will help coordinate your care to make sure you are receiving the best possible care in a medical neighborhood where all of the providers work together.

29. Will changing my Primary Care Provider change my specialty care providers?

No, as described above, your current referrals process will remain the same. Referrals will be forwarded to United by your Medical Home Team, who will then help you arrange an appointment with the specialist.

30. What if I am referred for Surgery and would like a 2nd opinion?

We encourage patients to seek a second opinion, especially before a major procedure. This may be with a different doctor of the same specialty at the Naval Hospital, or we may refer you to a civilian specialist.

31. Can I still go to my local pharmacy for a flu shot?

Flu shots are exempted - you can go anywhere TRICARE accepts, which includes many civilian facilities. This initiative does not change the flu shot policy. Please check with the facility or call United at (877) 988-9378 to make sure the facility is TRICARE approved.

32. Are vision exams (Optometry) covered?

Vision examinations are performed by our Optometry Clinic, which is considered specialty care. The hospital optimization plan does not change specialty care.

33. Medical records: Do we have to fill out new forms? Who keeps the record? Can you promise me you will not lose my record?

Our medical records are now entirely electronic, and backed up in multiple locations, for ease of access to our providers and continuity of care for our patients. Indeed, we can immediately review medical record entries made several years ago at any military hospital. You may have to fill out some forms, but we keep these to a minimum.

34. How do the records from my civilian doctor get into my military medical record when I make the switch to the Naval Hospital?

We will ask you to sign a release, and we will then obtain the records from your civilian provider and scan them into your electronic record. The hospital covers any cost for the records when we request them directly, so there is no cost to you.

35. How do you know when you need a preauthorization form?

United Health Care has a list on-line (www.uhcmilitarywest.com), or you may call them at (877) 988-9378.

36. Is a preauthorization required for Urgent Care?

Yes. Either your primary care manager or the Nurse Advice Line (360) 257-9500 must preauthorize urgent care.

37. Will there be co-pays for colonoscopies performed by Navy Surgeons at the civilian hospitals?

There is no co-pay for the military provider, but there may be a co-pay for using the civilian hospital's facilities; for information on specific insurance claims, please contact United at (877) 988-9378.

38. How did you decide who would be affected by this initiative?

This initiative affects those TRICARE Prime patients who have Network primary care providers and who live 30 minutes or less driving time from the Naval Hospital. The 30 minute drive time is determined by TRICARE policy.

39. If I received a letter dated January 27, 2014, when will I be reassigned to a primary care provider in Naval Hospital Oak Harbor's Medical Home Port?

Although the letter stated the reassignments would take effect March 1, 2014, we heard your concerns that this did not allow sufficient time for our beneficiaries to make the transition, and thus we have extended the date. Reassignments will now take effect **April 1, 2014**.

40. Was this decision driven by TRICARE or a local initiative?

Medical Home Ports (MHP) are a Military Medicine Initiative as they have been shown to improve the quality of care and patient satisfaction. Indeed, they are now being adopted by many civilian healthcare systems. Bringing TRICARE Prime patients back to the military treatment facility is a natural part of this, as we want our patients to have the best possible care. Although different military treatment facilities will be implementing the TRICARE Prime optimization initiative at different times, this is a military-wide initiative. Please see FAQ #1 for more information on MHP.

41. How does the Waiver process work?

The waiver form is available on the NHOH web page ([Enrollment Waiver Request](#)) or in person at the hospital. If you received a letter and feel you have medical issues taken care of by your current primary care provider that cannot be provided here at NHOH, please note that in your waiver request. You may also attach any additional documentation you would like. Once the waiver is received, the Director of Medical Services will review to see if your medical issues can be provided at NHOH and provide a recommendation to the Commanding Officer. The Commanding Officer will have final approval of all waivers. The primary criteria for waivers is whether NHOH Medical Home Port can provide the primary care you need. The waiver process will take approximately two business days to process. We will call you and send you a letter regarding your waiver request, once a decision has been made.

42. If I didn't receive a letter am I affected?

No. But if you would like to make sure, please feel free to call our Enrollment Manager, Ms. Susan Kreps at (360) 257-9716.

43. I am enrolled with TRICARE for Life (65 years of age or older). Do I have to change providers?

No. Patients with TRICARE for Life are not required to change. However we welcome patients of any age into our Medical Home Port. No one "ages out" anymore. Thus if you are TRICARE for Life and would like to enroll

to our Medical Home Port, we would be honored to serve you, please contact (877) 988-9378 to enroll now!

44. Can I be seen at NHOH if I am Medicare eligible?

Yes! If you are Medicare eligible, you are not required to return to NHOH, but you are always welcome to have your care delivered here and we'd love to have you.

45. How many people are affected by this change?

There are approximately 750 beneficiaries who are being reassigned to Naval Hospital Oak Harbor for primary care.

To ease you through the transition, NHOH has established a 24/7 Nurse/Provider Advice line. You may call 360-257-9500 anytime to talk with a nurse or provider about any medical questions. This number will change around April 1, 2014, and we will send you the new number when it becomes available. In addition NHOH has extended our Medical Home Port primary care hours: Family Medicine is now open 7:30 a.m. to 6 p.m. Monday - Friday and 9 a.m. to noon on Saturday and Sundays. We are closed on Federal holidays. The Pharmacy has also extended its hours to 6:30 p.m. weekdays. For more information or further input, please contact our Customer Service representative at 360-257-9554.

46. How did you determine drive time?

UnitedHealth Military & Veterans uses a standard mapping software that is used throughout the Department of Defense. The software calculates driving time from the patient's home address in DEERS to the Naval Hospital. For more information on this, please contact United Health at 877-988-9378.

47. Can I appeal the drive time determination?

Since drive time is determined by standardized, DoD-wide mapping software, this decision is not appealable. You are encouraged to ensure your address is correct in DEERS, as this could impact on the driving time calculation. If it is incorrect, please contact United after it has been corrected and your drive time can be recalculated. NHOH is accepting waiver requests based on our ability to provide the primary care required by the patient.

48. What if my address is wrong in the system?

Please visit the DEERS website at www.tricare.mil/DEERS for information on how to correct your address in DEERS. Once your address is correct, please contact United Health at (877) 988-9378, and they will use the mapping software to recalculate your driving time.

49. We were at the Naval Hospital 20 yrs ago but were sent to the Network because of lack of resources at the Naval Hospital. Can we "grandfather" people to stay Prime to the Network?

As beneficiary populations shift from inpatient care to outpatient care, NHOH must maximize our resources and any redistribution focuses on staffing our hospitals based on population needs, targeted primary care enrollment, and specialty support.

Navy Medicine must adapt, reshape, and re-align some of our Military Treatment Facilities in order to optimize our limited resources, to provide the best care to our beneficiaries, to ensure our providers receive important training opportunities, while addressing the rising cost of health care across the Military Health System.

As staffing at Military Treatment Facilities is optimized, the health care experience of our beneficiaries and the quality of care will be improved, costs will be reduced, and training opportunities for our health care team will be enhanced.

We do not foresee sending people to the Network in the future. Having patients come back to the MTF is one of the Navy Surgeon General's top priorities. This is a Navy-wide effort. Thus we are unable to support "grandfathering" people to the Network. We appreciate your understanding and flexibility during these transitions.

For more information or further input, please contact our Customer Service representative at (360) 257-9554.

50. Years ago I was asked to leave NHOH, will I be asked to leave again when the base expands and the squadrons arrive?

There is no foreseeable time when you will be asked to leave NHOH. The incoming squadrons will be coming with the medical staff they currently utilize, both flight surgeons for the active duty and primary care providers for the family members.

51. Will this policy change when the Commanding Officer leaves?

No. This is a military-wide initiative, thus a change in commanding officers will not change this policy.

52. If I choose to change to Standard due to this change, will my TRICARE Prime fee be refunded for the part of the year I will not be Prime?

No. TRICARE Prime fees are not refundable if already paid for the entire year. However, in order to help mitigate the possible negative financial impact this might cause, for those who have already paid the

TRICARE Prime enrollment fee for the entire fiscal year (October 1, 2013 through September 30, 2014), the CO is offering the opportunity to remain with your current Network primary care provider until October 1, 2014. Those who are in this group will receive a letter from the Commanding Officer regarding the extension.

53. Since the TRICARE Prime fees are not reimbursable if I paid for the entire year in advance, can I stay and delay this change if I have already paid for the entire year?

Yes. Recognizing that the fee is not reimbursable, we will grant a waiver for those retirees who have already paid the TRICARE Prime fee for the entire year until October 1, 2014 (when the fiscal year ends).

54. If I elect to change to TRICARE Standard, what is my maximum out of pocket cost?

In most cases, the annual cap is \$3000.00. Please contact UnitedHealth Military & Veterans for details on your particular situation at (877) 988-9378 or online at www.uhcmilitarywest.com

55. Is it true that once I switch to TRICARE Standard, I have to wait one year to switch back to TRICARE Prime?

In most cases yes, but there may be some exceptions. Please contact UnitedHealth Military & Veterans for details at 877-988-9378 or www.uhcmilitarywest.com

56. What is TRICARE Extra and how can I use it?

TRICARE Extra is like Standard, but is in place when you use a provider who has agreed to be a TRICARE Network Provider. In most cases TRICARE Extra provides lower co-pays and overall out-of-pocket cost. You can find a list of TRICARE Extra providers on the UnitedHealth Military & Veterans website (www.uhcmilitarywest.com) or you can call United at (877) 988-9378.

57. Regarding Medicare and TRICARE for Life (TFL), the Affordable Care Act (also known as "Obamacare") concerns me. I recently received a letter saying TRICARE provided "adequate coverage" or "minimum coverage." What does this mean?

TRICARE is considered adequate insurance under the Affordable Care Act. Thus you are not required to purchase other medical insurance nor pay a charge for not having insurance.

58. Who can I contact if I still have questions or need more information?

For general questions or to give input about our hospital, please contact our Customer Relations Officer, Ms. Sharon McIntyre, at (360) 257-9554.

For enrollment and waiver questions, please contact our Enrollment Manager, Ms. Susan Kreps, at (360) 257-9716.

For TRICARE questions, including questions about or to switch to TRICARE Standard, please contact UnitedHealth Military & Veterans at (877) 988-9378.

Information is also available on our website at [Enrollment Waiver Request](#) and the United website at www.uhcmilitarywest.com.